CLAIMS:

1. A gastrointestinal lead adapted to be implanted within the body to conduct electrical stimulation from an implantable or external gastrointestinal stimulator to a site of the GI tract and to conduct electrical signals of the GI tract from the site to the implantable or external gastrointestinal stimulator comprising:

an elongated lead body comprising a common lead body trunk extending from a lead body trunk proximal end to a junction with a plurality of lead body legs that extend from the junction to a like plurality of lead body leg distal ends;

an electrode head formed at each lead body leg distal end having a plate and supporting at least one stimulation/sense electrode and an active fixation mechanism whereby a plurality of active fixation attachment mechanisms are supported by a plurality of electrode heads;

a connector assembly at the lead body proximal end comprising a plurality of connector elements; and

a plurality of lead conductors enclosed within the lead body, each lead conductor extending between a stimulation/sense electrode through a lead body leg and the lead body trunk to a proximal connector element of the connector assembly,

wherein each active fixation mechanism extends away from the plate of the electrode head and is shaped to penetrate through the serosa and into the muscularis externa upon application of force to the electrode head to draw the plate against the serosa and operatively contact the stimulation/sense electrode with the GI tract wall, whereby the plate inhibits further advancement of the active fixation mechanism and perforation of the GI tract wall and the active fixation mechanism inhibits dislodgement of the stimulation/sense electrode from operative contact with the GI tract wall,

2. The gastrointestinal lead of Claim 1, wherein;

one active fixation mechanism comprises a helix comprising one or more coil turn extending from a helix fixed end and a helix free end and having a helix